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UNITED STATES BANKRUPTCY COURT EASTERN DISTRICT OF VIRGINIA

CHAPTER 13 PLAN AND RELATED MOTIONS

Name of Debtor(s)	Rosalind K Martin	Case No: 15-36112
Γhis plan, dated <u>De</u>	ecember 16, 2015 , is:	
<u>~</u>	the <i>first</i> Chapter 13 plan filed in this case. a modified Plan, which replaces the □confirmed or □unconfirmed Plan dated.	
	Date and Time of Modified Plan Confirming Hearing:	
	Place of Modified Plan Confirmation Hearing:	
The l	Plan provisions modified by this filing are:	
Cred	itors affected by this modification are:	

NOTICE: YOUR RIGHTS WILL BE AFFECTED. You should read these papers carefully. If you oppose any provision of this Plan, or if you oppose any included motions to (i) value collateral, (ii) avoid liens, or (iii) assume or reject unexpired leases or executory contracts, you MUST file a timely written objection.

This Plan may be confirmed and become binding, and the included motions in paragraphs 3, 6, and 7 to value collateral, avoid liens, and assume or reject unexpired leases or executory contracts may be granted, without further notice or hearing unless a written objection is filed not later than seven (7) days prior to the date set for the confirmation hearing and the objecting party appears at the confirmation hearing.

The debtor(s)' schedules list assets and liabilities as follows:

Total Assets: \$21,375.00

Total Non-Priority Unsecured Debt: \$29,362.66

Total Priority Debt: **\$148.00**Total Secured Debt: **\$8,551.00**

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- **1. Funding of Plan.** The debtor(s) propose to pay the trustee the sum of **\$260.00 Monthly for 60 months**. Other payments to the Trustee are as follows: **NONE** . The total amount to be paid into the plan is **\$ 15,600.00** .
- 2. **Priority Creditors.** The Trustee shall pay allowed priority claims in full unless the creditor agrees otherwise.
 - A. Administrative Claims under 11 U.S.C. § 1326.
 - 1. The Trustee will be paid the percentage fee fixed under 28 U.S.C. § 586(e), not to exceed 10%, of all sums disbursed except for funds returned to the debtor(s).
 - 2. Debtor(s)' attorney will be paid \$_5,050.00 balance due of the total fee of \$_5,050.00 concurrently with or prior to the payments to remaining creditors.
 - B. Claims under 11 U.S.C. §507.

The following priority creditors will be paid by deferred cash payments pro rata with other priority creditors or in monthly installments as below, except that allowed claims pursuant to 11 U.S.C. § 507(a)(1) will be paid prior to other priority creditors but concurrently with administrative claims above:

Creditor	Type of Priority	Estimated Claim	Payment and Term
Henrico County	Taxes and certain other debts	148.00	Prorata
_			2 months

- 3. Secured Creditors: Motions to Value Collateral ("Cramdown"), Collateral being Surrendered, Adequate Protection Payments, and Payment of certain Secured Claims.
 - A. Motions to Value Collateral (other than claims protected from "cramdown" by 11 U.S.C. § 1322(b)(2) or by the final paragraph of 11 U.S.C. § 1325(a)). Unless a written objection is timely filed with the Court, the Court may grant the debtor(s)' motion to value collateral as set forth herein.

This section deals with valuation of certain claims secured by real and/or personal property, other than claims protected from "cramdown" by 11 U.S.C. § 1322(b)(2) [real estate which is debtor(s)' principal residence] or by the final paragraph of 11 U.S.C. § 1325(a) [motor vehicles purchased within 910 days or any other thing of value purchased within 1 year before filing bankruptcy], in which the replacement value is asserted to be less than the amount owing on the debt. Such debts will be treated as secured claims only to the extent of the replacement value of the collateral. That value will be paid with interest as provided in sub-section D of this section. You must refer to section 3(D) below to determine the interest rate, monthly payment and estimated term of repayment of any "crammed down" loan. The deficiency balance owed on such a loan will be treated as an unsecured claim to be paid only to the extent provided in section 4 of the Plan. The following secured claims are to be "crammed down" to the following values:

CreditorCollateralPurchase DateEst Debt Bal.Replacement ValueCREDIT2005 Toyota Avalon Sedan 4D LimitedOpened 10/29/127,551.009,875.00ACCEPTANCENADA Clean RetailLast Active
10/06/15

B. Real or Personal Property to be Surrendered.

Upon confirmation of the Plan, or before, the debtor(s) will surrender his/her/their interest in the collateral securing the claims of the following creditors in satisfaction of the secured portion of such creditors' allowed claims. To the extent that the collateral does not satisfy the claim, any timely filed deficiency claim to which the creditor is entitled may be paid as a non-priority unsecured claim. Confirmation of the Plan shall terminate the automatic stay as to the interest of the debtor(s) and the estate in the collateral.

<u>Creditor</u> <u>Collateral Description</u> <u>Estimated Value</u> <u>Estimated Total Claim</u>

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C. Adequate Protection Payments.

The debtor(s) propose to make adequate protection payments required by 11 U.S.C. § 1326(a) or otherwise upon claims secured by personal property, until the commencement of payments provided for in sections 3(D) and/or 6(B) of the Plan, as follows:

Creditor Collateral Description Adeq. Protection Monthly Payment To Be Paid By

CREDIT ACCEPTANCE 2005 Toyota Avalon Sedan 4D Limited NADA Clean Retail 139.92 Trustee

Any adequate protection payment upon an unexpired lease of personal property assumed by the debtor(s) pursuant to section 6(B) of the Plan shall be made by the debtor(s) as required by 11 U.S.C. § 1326(a)(1)(B) (payments coming due after the order for relief).

D. Payment of Secured Claims on Property Being Retained (except only those loans provided for in section 5 of the Plan):

This section deals with payment of debts secured by real and/or personal property [including short term obligations, judgments, tax liens and other secured debts]. After confirmation of the Plan, the Trustee will pay to the holder of each allowed secured claim, which will be either the balance owed on the indebtedness or, where applicable, the collateral's replacement value as specified in sub-section A of this section, **whichever is less**, with interest at the rate provided below, the monthly payment specified below until the amount of the secured claim has been paid in full. **Upon confirmation of the Plan**, the valuation and interest rate shown below will be binding unless a timely written objection to confirmation is filed with and sustained by the Court.

E. Other Debts.

Debts which are (i) mortgage loans secured by real estate which is the debtor(s)' primary residence, or (ii) other long term obligations, whether secured or unsecured, to be continued upon the existing contract terms with any existing default in payments to be cured pursuant to 11 U.S.C. § 1322(b)(5), are provided for in section 5 of the Plan.

4. Unsecured Claims.

- A. Not separately classified. Allowed non-priority unsecured claims shall be paid pro rata from any distribution remaining after disbursement to allowed secured and priority claims. Estimated distribution is approximately ___5__ %. The dividend percentage may vary depending on actual claims filed. If this case were liquidated under Chapter 7, the debtor(s) estimate that unsecured creditors would receive a dividend of approximately ___0 ___ %.
- B. Separately classified unsecured claims.

<u>Creditor</u> <u>Basis for Classification</u> <u>Treatment</u>

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5.	Mortgage Loans Secured by Real Property Constituting the Debtor(s)' Primary Residence; Other Long Term
	Payment Obligations, whether secured or unsecured, to be continued upon existing contract terms; Curing of any
	existing default under 11 U.S.C. § 1322(b)(5).

A. Debtor(s) to make regular contract payments; arrears, if any, to be paid by Trustee. The creditors listed below will be paid by the debtor(s) pursuant to the contract without modification, except that arrearages, if any, will be paid by the Trustee either pro rata with other secured claims or on a fixed monthly basis as indicated below, without interest unless an interest rate is designated below for interest to be paid on the arrearage claim and such interest is provided for in the loan agreement.

	interest unless an interest rate is designated by provided for in the loan agreement.	pelow for interest to b	e paid on the	arrearage c	laim and such	interest is
Creditor -NONE-	<u>Collateral</u>	Regular Contract <u>Payment</u>	Estimated Arrearage	Arrearage Interest <u>Rate</u>	Estimated Cure Period	Monthly Arrearage <u>Payment</u>
В.	Trustee to make contract payments and coregular contract monthly payments that come debts shall be cured by the Trustee either probelow.	e due during the perio	od of this Plan	, and pre-p	etition arrearag	es on such
Creditor -NONE-	<u>Collateral</u>	Regular Contract <u>Payment</u>	Estimated Arrearage	Interest Rate	Term for Arrearage	Monthly Arrearage <u>Payment</u>
С.	Restructured Mortgage Loans to be paid constituting the debtor(s)' principal residence payment under the Plan is due shall be paid 1322(c)(2) with interest at the rate specified	e upon which the last by the Trustee during	scheduled con	ntract paym	ent is due befo	re the final
Craditor	Colleteral	Interest	Estimated		hly Doymt & Fo	t Torm**

<u>Creditor</u> <u>Collateral</u> <u>Rate</u> <u>Claim</u> <u>Monthly Paymt& Est. Term**</u>
-NONE-

- **6. Unexpired Leases and Executory Contracts.** The debtor(s) move for assumption or rejection of the executory contracts and leases listed below.
 - A. Executory contracts and unexpired leases to be rejected. The debtor(s) reject the following executory contracts.

<u>Creditor</u> -NONE- Type of Contract

B. Executory contracts and unexpired leases to be assumed. The debtor(s) assume the following executory contracts. The debtor agrees to abide by all terms of the agreement. The Trustee will pay the pre-petition arrearages, if any, through payments made pro rata with other priority claims or on a fixed monthly basis as indicated below.

Monthly
Payment Estimated

Creditor Type of Contract Arrearage for Arrears Cure Period

-NONE-

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7. Liens Which Debtor(s) Seek to A	7.	ek to Avoid.
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A. The debtor(s) move to avoid liens pursuant to 11 U.S.C. § 522(f). The debtor(s) move to avoid the following judicial liens and non-possessory, non-purchase money liens that impair the debtor(s)' exemptions. Unless a written objection is timely filed with the Court, the Court may grant the debtor(s)' motion and cancel the creditor's lien. If an objection is filed, the Court will hear evidence and rule on the motion at the confirmation hearing.

Creditor -NONE-

Collateral

Exemption Amount

Value of Collateral

B. Avoidance of security interests or liens on grounds other than 11 U.S.C. § 522(f). The debtor(s) have filed or will file and serve separate pleadings to avoid the following liens or security interests. The creditor should review the notice or summons accompanying such pleadings as to the requirements for opposing such relief. The listing here is for information purposes only.

Creditor -NONE-

Exhibits:

Type of Lien

Description of Collateral

Basis for Avoidance

- 8. Treatment and Payment of Claims.
 - All creditors must timely file a proof of claim to receive payment from the Trustee.
 - If a claim is scheduled as unsecured and the creditor files a claim alleging the claim is secured but does not timely object to confirmation of the Plan, the creditor may be treated as unsecured for purposes of distribution under the Plan. This paragraph does not limit the right of the creditor to enforce its lien, to the extent not avoided or provided for in this case, after the debtor(s) receive a discharge.
 - If a claim is listed in the plan as secured and the creditor files a proof of claim alleging the claim is unsecured, the creditor will be treated as unsecured for purposes of distribution under the Plan.
 - The Trustee may adjust the monthly disbursement amount as needed to pay an allowed secured claim in full.
- **9. Vesting of Property of the Estate.** Property of the estate shall revest in the debtor(s) upon confirmation of the Plan. Notwithstanding such vesting, the debtor(s) may not sell, refinance, encumber real property or enter into a mortgage loan modification without approval of the Court after notice to the Trustee, any creditor who has filed a request for notice and other creditors to the extent required by the Local Rules of this Court.
- 10. Incurrence of indebtedness. The debtor(s) shall not voluntarily incur additional indebtedness exceeding the cumulative total of \$5,000 principal amount during the term of this Plan, either unsecured or secured against personal property, except upon approval of the Court after notice to the Trustee, any creditor who has filed a request for notice, and other creditors to the extent required by the Local Rules of this Court.
- 11. Other provisions of this plan:

Signatures:	
Dated: December 16, 2015	
/s/ Rosalind K Martin	/s/ Martin C. Conway
Rosalind K Martin	Martin C. Conway 34334
Debtor	Debtor's Attorney

Copy of Debtor(s)' Budget (Schedules I and J);

Matrix of Parties Served with Plan

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Certificate of Service

I certify that on <u>December 16, 2015</u>, I mailed a copy of the foregoing to the creditors and parties in interest on the attached Service List.

/s/ Martin C. Conway
Martin C. Conway 34334
Signature

1712 Financial Loop
Woodbridge, VA 22192
Address
855-848-3011

Telephone No.

Ver. 09/17/09 [effective 12/01/09]

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E:11						İ				
	in this information to identify your cotor 1 Rosalind K I									
Del	otor 2									
Uni	ted States Bankruptcy Court for the	: EASTERN DISTRICT	OF VIRGINIA							
	se number 15-36112		-				c if this is:	d filing		
_									g postpetition ollowing date	
0	fficial Form 106l					MI	M / DD/ Y	YYY		
S	chedule I: Your Inc	ome								12/15
sup spo atta	as complete and accurate as possiblying correct information. If you use. If you are separated and you ch a separate sheet to this form. Describe Employment	are married and not fili r spouse is not filing w	ng jointly, and your spith you, do not include	oouse e infor	is liv mati	ing with on about	you, incl your spo	ude infor	mation abou ore space is	it your needed,
1.	Fill in your employment information.		Debtor 1				Debtor 2	or non-fi	ling spouse	
	If you have more than one job, attach a separate page with	Employment status	☐ Employed				☐ Emplo	yed		
	information about additional employers.		■ Not employed				☐ Not er	nployed		
	Include part-time, seasonal, or	Occupation	Nurse- Disability							
	self-employed work.	Employer's name								
	Occupation may include student or homemaker, if it applies.	Employer's address								
		How long employed t	here?							
Par	t 2: Give Details About Mor	nthly Income								
	mate monthly income as of the duse unless you are separated.	ate you file this form. If	you have nothing to rep	ort for	any	line, write	\$0 in the	space. In	clude your n	on-filing
•	u or your non-filing spouse have mo e space, attach a separate sheet to		ombine the information	for all	empl	oyers for	that perso	on on the I	ines below. I	f you need
						For Deb	tor 1		otor 2 or ng spouse	
2.	List monthly gross wages, sala deductions). If not paid monthly,			2.	\$		0.00	\$	N/A	-
3.	Estimate and list monthly overt	ime pay.		3.	+\$		0.00	+\$	N/A	-
4.	Calculate gross Income. Add lin	ne 2 + line 3.		4.	\$		0.00	\$	N/A	

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Deb	tor 1	Rosalind K Martin	-	C	Case number (if kn	own)	15-36°	112		
					For Debtor 1		non-f	ebtor iling s	pouse	
	Cop	by line 4 here	4.		\$	0.00	\$		N/A	<u>. </u>
5.	List	all payroll deductions:								
	5a.	Tax, Medicare, and Social Security deductions	58	a.	\$ 0	0.00	\$		N/A	4
	5b.	Mandatory contributions for retirement plans	5b	Э.	\$	0.00	\$		N/A	_
	5c.	Voluntary contributions for retirement plans	50	С.		0.00	\$		N/A	_
	5d.	Required repayments of retirement fund loans	50			0.00	\$		N/A	_
	5e.	Insurance	56		. —	0.00	\$		N/A	_
	5f. 5g.	Domestic support obligations Union dues	5f 5g		·	0.00	\$		N/A N/A	_
	5h.	Other deductions. Specify:		ษ. า.+	. —		+ \$		N/A	_
6.	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	_ 6.		. —	0.00	\$		N/A	_
7.		culate total monthly take-home pay. Subtract line 6 from line 4.	7.			0.00	\$		N/A	_
8.	List 8a.	all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	88	а.		0.00	\$		N/A	_
	8b.	Interest and dividends	8k			0.00	\$		N/A	
	8c. 8d.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. Unemployment compensation	80			0.00 0.00	\$		N/A N/A	_
	8e.	Social Security	86	Э.	\$ 0	0.00	\$		N/A	_
	8f. 8g.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: VEC Unemployment Benefits Pension or retirement income	e 8f 8g		\$1,048	3.00 0.00	\$ 		N/A N/A	_
	8h.	Other monthly income. Specify:		_		0.00	+ \$		N/A	_
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	1,048	3.00	\$		N/	A
10	Cal	culate monthly income. Add line 7 + line 9.	10.	\$	1,048.00	+ \$		N/A	= \$	1,048.00
		I the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.		Т -	1,040.00	. _		14/4		1,040.00
11.	Star Incliothe Do	te all other regular contributions to the expenses that you list in Schedule ude contributions from an unmarried partner, members of your household, your or friends or relatives. not include any amounts already included in lines 2-10 or amounts that are not exify:	dep		. ,		,	chedul 11.		0.00
12.		If the amount in the last column of line 10 to the amount in line 11. The rester that amount on the Summary of Schedules and Statistical Summary of Certailies						12.	\$	1,048.00
13.	Do	you expect an increase or decrease within the year after you file this form	?						Combi month	ned ly income
		No.								
		Voc Evoloin:								

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Fill in this inform	matica to identify				ī		
	nation to identify y						
Debtor 1	Rosalind K I	Martin				ck if this is:	
Debtor 2						An amended filing	wing postpetition chapter
(Spouse, if filing)							the following date:
United States Bar	nkruptcy Court for the	EASTE	RN DISTRICT OF VIRGIN	IIA	-	MM / DD / YYYY	
Case number	15-36112						
(If known)							
Official F	orm 106J						
	e J: Your	Exner	1808				12/1
Be as complet information. If number (if kno	e and accurate as	possible eded, atta ry questio	. If two married people a ach another sheet to this				for supplying correct
	oint case?	iloiu					
■ No. Go	to line 2.	in a sepai	rate household?				
_	No Yes. Debtor 2 mu	st file Offic	ial Form 106J-2, <i>Expense</i> :	s for Separate Hous	ehold of Deb	otor 2.	
2. Do you ha	ave dependents?	■ No					
Do not list and Debto		☐ Yes.	Fill out this information for each dependent	Dependent's relati		Dependent's age	Does dependent live with you?
Do not sta	te the						□ No
dependen	ts names.						☐ Yes
							☐ No
							Yes
							□ No
				-			☐ Yes
							□ No
	xpenses include		No				☐ Yes
	of people other t and your depende	han 🦳	Yes				
Estimate your	f a date after the	our bankr	ly Expenses uptcy filing date unless y y is filed. If this is a sup				
	ıch assistance an		government assistance cluded it on Schedule I:			Your exp	enses
4. The renta	Lor home owners	hin avnor	ses for your residence. I	nolude firet mortana	10		
	and any rent for th			noidue ilist mortgag	је 4. \$	·	0.00
If not incl	uded in line 4:						
4a. Rea	l estate taxes				4a. \$	<u> </u>	0.00
	perty, homeowner'				4b. \$		0.00
	ne maintenance, re				4c. \$		0.00
	neowner's associa		dominium dues our residence, such as ho		4d. \$		0.00

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Debtor 1 Rosa	alind K Martin	Case number	(if known)	15-36112
. Utilities:				
	ricity, heat, natural gas	6a. \$		0.00
	r, sewer, garbage collection	6b. \$		0.00
	hone, cell phone, Internet, satellite, and cable services	6c. \$		210.00
	Specify:	6d. \$		0.00
	ousekeeping supplies	7. \$		
		·		100.00
	and children's education costs	8. \$		0.00
_	aundry, and dry cleaning	9. \$		0.00
	are products and services	10. \$		0.00
	d dental expenses	11. \$		60.00
	tion. Include gas, maintenance, bus or train fare.	12. \$		180.00
	de car payments.			
	ent, clubs, recreation, newspapers, magazines, and books	13. \$		0.00
	contributions and religious donations	14. \$		0.00
5. Insurance.				
	de insurance deducted from your pay or included in lines 4 or 20.	4F- A		2.22
15a. Life in		15a. \$		0.00
15b. Health		15b. \$		0.00
15c. Vehic	le insurance	15c. \$		109.00
	insurance. Specify:	15d. \$		0.00
3. Taxes. Do n	not include taxes deducted from your pay or included in lines 4 or 2	20.		
Specify: Po	ersonal property taxes on vehicles	16. \$		24.67
7. Installment	or lease payments:			
17a. Car pa	ayments for Vehicle 1	17a. \$		0.00
17b. Car pa	ayments for Vehicle 2	17b. \$		0.00
17c. Other	: Specify:	17c. \$		0.00
17d. Other.		17d. \$	-	0.00
	ents of alimony, maintenance, and support that you did not re	port as		
	om your pay on line 5, Schedule I, Your Income (Official Form			0.00
	nents you make to support others who do not live with you.	\$		0.00
Specify:		19.		
). Other real p	property expenses not included in lines 4 or 5 of this form or	on Schedule I: Your	Income.	
	ages on other property	20a. \$		0.00
20b. Real	estate taxes	20b. \$	-	0.00
20c. Prope	erty, homeowner's, or renter's insurance	20c. \$		0.00
	enance, repair, and upkeep expenses	20d. \$		0.00
	eowner's association or condominium dues	20e. \$		0.00
		21. +9		
. Other: Spec	CITY:	Z1. 1)	0.00
2. Calculate ve	our monthly expenses			
-	es 4 through 21.		\$	683.67
	ne 22 (monthly expenses for Debtor 2), if any, from Official Form		\$	
			·	000.07
ZZC. Add line	e 22a and 22b. The result is your monthly expenses.		\$	683.67
3. Calculate v	our monthly net income.			
	line 12 (your combined monthly income) from Schedule I.	23a. \$		1,048.00
	your monthly expenses from line 22c above.	23b\$		683.67
200. Обру	year menting expended from the ZZO above.	200. ψ		003.07
23c Subtra	act your monthly expenses from your monthly income.			
	esult is your <i>monthly net income</i> .	23c. \$		364.33
1110 10	ocal to your monany not moomo.			
4. Do you exp	ect an increase or decrease in your expenses within the year	after you file this fo	rm?	
	do you expect to finish paying for your car loan within the year or do you expe			se or decrease because of a
modification to	the terms of your mortgage?	,		
■ No.				
— 110.				

ALLIANCEONE 1684 WOODLANDS DR STE 15 MAUMEE, OH 43537

ALLIED COLLECTION SERV 3080 S DURANGO DR STE 20 LAS VEGAS, NV 89117

AMCA P.O. Box 1235 ELMSFORD, NY 10523

Avectus Healthcare Solutions P.O. Box 1465 Corinth, MS 38834

Bernice Mouzone 108 East 33rd Street Richmond, VA 23224

BON SECOURS RICHMOND HEALTH CENTER PO BOX 28538 HENRICO, VA 23228

Capital Chiropractic Center 3201 A Skipwith Road Henrico, VA 23294

CAPITAL ONE BANK USA N 15000 CAPITAL ONE DR RICHMOND, VA 23238

Cash Net P.O. Box 643990 Cincinnati, OH 46264-3990

CENTRAL 3700 MECHANICSVILLE PIKE RICHMOND, VA 23223

CENTRAL FURNITURE COMPANY INC 3700 Mechanicsville Pike Richmond, VA 23223

Colortyme 500 E Laburnum Ave, Richmond, VA 23222

Comcast PO Box 3006 Southeastern, PA 19398

CREDIT ACCEPTANCE PO BOX 513 SOUTHFIELD, MI 48037

CREDIT ONE BANK NA PO BOX 98875 LAS VEGAS, NV 89193

DC-Capital Chiropractic Center 3201 Skipwith Rd Henrico, VA 23294

ENHANCED RECOVERY CO L 8014 BAYBERRY RD JACKSONVILLE, FL 32256

FOCUSED RECOVERY SOLUTIONS 9701 METROPOLITAN CT STE B RICHMOND, VA 23236

Great Richmond Rentals 2000 West Club Lane Richmond, VA 23226

Henrico County P.O. Box 90799 Henrico, VA 23228-0799

Henrico County Public Utilitie P.O. 90775 Henrico, VA 23273-0775

Henrico General District Court P. O. Box 90775 4301 East Parham Road Henrico, VA 23273-0775 I C SYSTEM INC PO BOX 64378 SAINT PAUL, MN 55164

META/MONEYPWRLOC 5501 S BROADBAND LN SIOUX FALLS, SD 57108

MiraMed Revenue Group LLC 991 Oak Creek Drive Lombard, IL 60148-6408

MIRAMEDRG 991 OAK CREEK DR LOMBARD, IL 60148

Patterson Ave. Farm Prac 7007 Harbour View Blvd. Suite 108 Suffolk, VA 23435

PMAB LLC 4135 S STREAM BLVD STE 4 CHARLOTTE, NC 28217

Richmond GDC John Marshall Courts Building 400 N 9th St. Room 203 Richmond, VA 23219

SOUTHWEST CREDIT SYSTE 4120 INTERNATIONAL PKWY CARROLLTON, TX 75007

ST MARYS HOSPITAL 5801 BREMO RD RICHMOND, VA 23226

UNITED CONSUMERS PO BOX 4466 WOODBRIDGE, VA 22194-4466

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